Honorable Chair Donovan Rhode Island House Health and Human Services Committee 82 Smith St. Providence, RI 02903

Re: Support H. 5629 AN ACT RELATING TO INSURANCE – ACCIDENT AND INSURANCE POLICIES

Dear Chair Donovan and distinguished members of the House Committee on Health and Human Services:

My name is Maxine Slater, and I am a third year medical student at The Warren Alpert Medical School of Brown University. I've lived in Providence, Rhode Island for the past 6 years. I am here today to testify in strong support of House Bill 5629 (Rep. Alzate), legislation that would bring the medical standard of infertility and the law into better alignment. This bill will expand fertility care to people for whom this medical right has historically been denied – namely, LGBTQ+ people, single people, and those without the financial means to pay for out-of-pocket costs of family-building.

Fertility care should not be a privilege reserved for a lucky few. History has taught us in ways cruel and confounding that fertility care is health care, and health care is a human right. As an aspiring physician, and someone who would like to have children one day, this issue is personal to me. I have been a medical student here for 2 years already. I will continue to be in training for another 5 years at minimum. These years of training are long and challenging, to put it mildly. And while many women rise above the odds by doing both – having children and completing their medical training simultaneously – this is simply not a reality for the large majority. Time and again I've been told that I should consider future career options based on how long the training takes, and whether or not I plan to start a family of my own. As the law currently stands, strict criteria proving infertility must be met for insurance to cover fertility preservation methods. Out of pocket costs from fertility health care can fall on the order of thousands to tens of thousands of dollars without this coverage. A mentor of mine once put it bluntly: with insurance coverage currently a remote possibility, I must prepare to shoulder these financial burdens, or I should resign myself to not having a family at all.

This is not a decision I, or anyone, should have to make. Nor should anyone have to wait until they are deemed medically infertile by arbitrary standards of age, marital status, or sexuality before insurance companies cover the costs of family planning.

I've spoken to you all about what this bill could mean to me and my peers. But what could this bill mean to Rhode Island? With more expansive fertility care coverage, this bill has the opportunity to create real incentive for physicians and physicians-in-training to stay in Rhode Island. It has the opportunity to invest in Rhode Island's healthcare system, both by directly expanding care for our patients as well helping retain those who perform this care. I support H 5629 because I believe in a future in Rhode Island where people, patients and physicians alike, can have more of a say in their fertility. I urge you to vote in favor of H 5629 and to believe in this future with me.

Thank you for your time and consideration.

Maxine Slater

maxine slater@brown.edu

Brown University BS'23 MD'27